



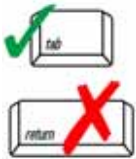
Massachusetts Department of Environmental Protection
Bureau of Resource Protection – Drinking Water Program

Contract Operator Directory

If a Massachusetts certified operator would like to have his/her name listed in the Certified Operator Directory or if there are changes to be made on an existing listing, please fill out this form and mail it to:

DEP-Certified Operator Program, One Winter Street – 6th Floor, Boston, MA 02108

Important:
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



A. What Type of Listing

☐ New listing

☐ Revised listing

☐ Delete listing

B. Operator Information

Name

Distribution Grade

Certification #

Treatment Grade

Certification #

Distribution Grade

Certification #

Treatment Grade

Certification #

Mailing Address

City/Town

State

Zip Code

Phone

Fax

E-mail address

C. City/Town Locations

List any of the cities and/or towns in which you are willing to work:

Note: if above boxes are left blank, DEP will arbitrarily select towns surrounding your mailing address town.

D. Signature

Operator's Signature

Date